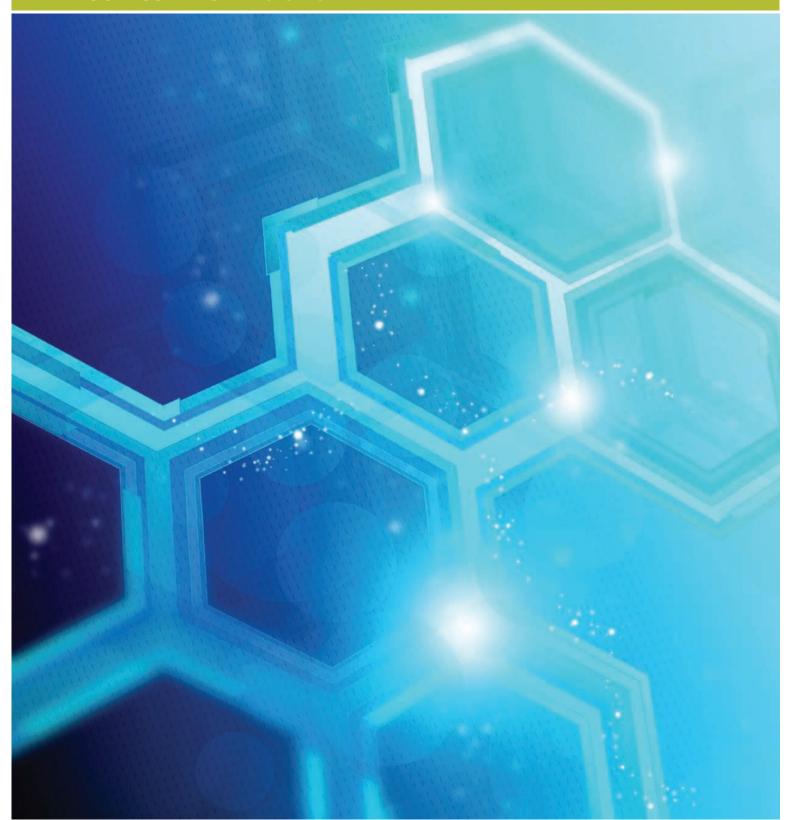
Expanding Our Reach

PROGRESS REPORT 2013-2014



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^{*}If you would like to obtain a copy of our audited financial statements for 2013/2014, please send your request to info@cehpea.ca



Dr. Kennneth A. Harris

CHAIR'S MESSAGE

On behalf of the Board of Directors of the Centre for the Evaluation of Health Professionals Educated Abroad (CEHPEA), I am pleased to introduce our 2013/2014 Progress Report. The report chronicles a year of growth in the volume and scope of the services we provide as we expand our reach to support internationally educated health professionals (IEHPs) seeking to practice in Ontario.

This growth was envisioned in the five-year Strategic Plan that the board of directors finalized in 2012. The plan was designed to ensure the organization's continued success and relevance as a trusted resource for the province's health care system.

As part of the Strategic Plan, the board went through a period of renewal to define the competencies we need from our directors to guide the organization into the future. This year, we were pleased to welcome the following new members on our board: Brenda Zimmerman, director of the Health Industry Management Program at the Schulich School of Business, York University; John McKinley, principal at JMcKinley Consulting and CloudIPHI; and George M. Thomson, senior director, International Programs at the National Judicial Institute. We have a small, hard-working board, and I would like to take this opportunity to thank our members for committing their time, energy and considerable expertise to invest in the best interests of CEHPEA.

The board works in close collaboration with Sten Ardal, the organization's chief executive officer (CEO) and the excellent staff. Sten, who was appointed CEO in the spring of 2013, has been able to build on the accomplishments that were already underway, while bringing fresh vigour to the strategic plan and its implementation. During this period of growth, he ensured high-quality staff and services while growing the business and expanding the organization's scope. I would like to commend Sten for his leadership this past year and acknowledge CEHPEA's outstanding staff members. They are knowledgeable, committed and collegial and the work they do is incredible.

We expect that our growth will continue as we leverage our expertise to ensure that other groups of IEHPs seeking to practice in Ontario have access to fair, transparent and timely assessments and services. We remain committed to providing high-quality assessments at a variety of levels to ensure that candidates are qualified and competent to provide care to the citizens of Ontario.



Sten Ardal

CEO'S MESSAGE

The past year has been a period of great growth and expansion for our organization as we implement our Strategic Plan (2012–2017). I am pleased to update you on the work that has taken place in the following major areas of focus:

- Exploring opportunities for expansion
- Strengthening the organizational structure
- Reviewing our brand identity

Our organization was originally created, as part of the HealthForce Ontario strategy, to develop and administer tests and transition programs for international medical graduates (IMGs). This is an area that has continued to show substantial growth. Working closely with

the Medical Council of Canada (MCC), we have been the largest test site in the country for their National Assessment Collaboration Exam, and in 2014, our test volumes almost doubled. We also offer innovative transition programs for IMGs accepted into residency training at Ontario's medical schools and this year we launched the Canadian Medicine Primer – a new, customized immersion program for sponsored visa trainees and clinical fellows.

Exploring Opportunities for Expansion

Over the years, it became apparent that other health care professionals and regulatory colleges could also benefit from the type of expertise that we have to offer. A strategic focus for us this past year has been leveraging our core expertise in competency assessments for physicians to help other regulatory colleges create a process that is fair, transparent and accessible for internationally educated health professionals (IEHPs) that want to practice in Ontario.

In 2009, we created an assessment process for IMGs interested in becoming physician assistants. Two years later, we partnered with the College of Nurses of Ontario (CNO) to create an objective structured clinical examination (OSCE) as part of a quality assurance initiative for nurse practitioners.

Our most substantial expansion has been the creation of a new assessment process for internationally educated nurses (IENs) that want to write the national registration exam for nursing. The IEN Competency Assessment Program, developed with the CNO, was launched in March 2013, and has rapidly expanded with 1,200 registered nurse candidates taking the test in 2014, an increase of 45% over expected volumes.

In 2013, we contracted with the College of Optometrists of Ontario (COO) to create Canada's first evaluating examination for internationally educated optometrists (IEOs). The assessment has generated a great deal of interest with several observers from colleges across the country attending the fall pilot test. The COO Evaluating Examination launches in June 2015.

This year, we launched a Communication Competency Program, recognizing the importance of language proficiency measurement as part of the process for IEHPs. This is a major new area of focus for our organization, made possible with grant funding from the Ontario Ministry of Citizenship, Immigration and International Trade (MCIIT). This program will serve as a hub for occupation-specific language assessments and other related resources and services for IEHPs and regulatory colleges.

An early success has been our recognition by the Centre for Canadian Language Benchmarks (CCLB) as the successful bidder in a national competition to become Canada's new centre for its Canadian English Language Benchmark Assessment for Nurses (CELBAN). This language proficiency test is recognized by nursing regulatory bodies and will be administered through our Communication Competency Program's CELBAN Centre in sites across Canada.

Strengthening the Organizational Structure

We have been building capacity and strengthening organizational structures to support our rapid growth in existing programs and assessments and the new business areas we have developed.

Investing in our human resources has been a very important priority as we strive to build a strong, unified internal team and provide opportunities for staff development. We have created a Standardized Patient Unit, an Exam Unit and expanded psychometric services to address higher test volumes and support the development of new assessments. We also undertook a major overhaul of our information technology, audio visual and security systems.

This fall, our Standardized Patient Program completed the biggest recruitment campaign in its history. It is now the second largest program in Canada with more than 1,200 standardized patients in its database, a 45% increase from 2013.

Reviewing Our Brand Identity

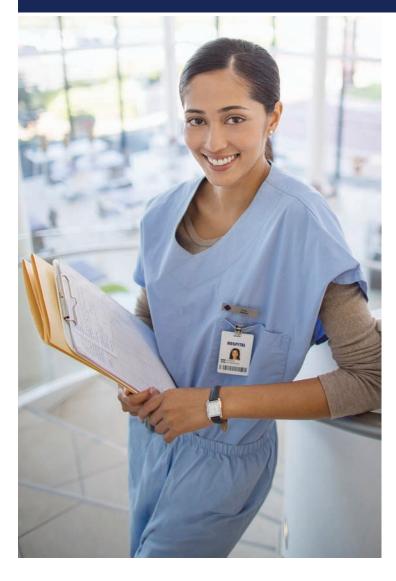
Given the evolution of our organization over the years, the board approved a review and analysis of our brand identity. As a result of that exercise, we will be officially launching our new name and brand in January 2015, when we will become Touchstone Institute: Competency Evaluation Experts. As Touchstone Institute, we look forward to expanding and enhancing our services, working with regulators, our partners and specialists to facilitate entry to practice for IEHPs.

Finally, I would like to express my appreciation for the leadership provided by Dr. Ken Harris and our Board of Directors, to the Ontario government for recognizing our critical role and providing the funding necessary for us to realize our mandate, to the clients who work with us to ensure that the highest quality is attained and maintained, to the candidates and learners who remind us of why we care so much about our work and to the staff who commit their very best every day and make this organization so compassionate and so unique.

COMPETENCY

ASSESSMENTS

Since 2007, our organization has played a key role in providing reliable information to colleges about the professional competencies of their candidates. "Colleges for self-regulated health care professions are entrusted with protecting the public," says Chief Executive Officer Sten Ardal. "Our assessments are highly relevant, providing information about candidates' performance in objective, structured clinical examinations that mirror real-life situations. This information has a great impact on colleges' ability to assess the competency of candidates."



The demand for a reliable, valid assessment of professional competencies continues to increase across professions. To meet these needs, we have increased our capacity in test administration, with larger cohorts of nursing and physician candidates passing through our doors every year.

We also continue to leverage our core expertise to support other professional groups in developing written and clinical competency assessments. This year, we have formed new partnerships, established strong networks and shared our expertise in assessment with a growing roster of health care organizations.

For us, this growth has meant an increased need for resources and training.

We've been building teams and networks of dedicated professionals with the education and experience necessary to deliver highquality assessments to diverse candidates.

The Candidate Experience

For IEHPs, a high-stakes assessment presents an opportunity to demonstrate their knowledge, skills and experience. It can also be a potentially stressful day for them. Our assessments are designed to ease test-takers' anxieties and provide them with the tools they need to proceed through the assessment with a full understanding of the guidelines and expectations.

Orientation

Before their assessments, candidates attend an orientation session that outlines the agenda for the day. They learn what paperwork they need to complete and receive an overview of the exams and the timing allotted for each of the day's events. For written tests, they are given examples of how to correctly mark their answers; for OSCEs, they learn what equipment they will have access to, the timing and steps of the clinical encounter, and what the expectations are for each stage.

Communication

Candidates receive clear instructions and guidance throughout their assessment. Prior to beginning each OSCE station, they are allotted time to read through written instructions, while during the clinical encounter clear overhead announcements notify them of the time remaining at each stage and where to proceed next. Group leaders and support staff are on hand to answer their questions and guide candidates from station to station.

Logistics

Our OSCE stations are organized in a way that allows for an easy transition from one stage of the assessment to the next. Candidates are

separated into groups and complete a series of clearly marked stations within a track.

Confusion during an exam adds unnecessary stress, so our goal is to ensure everything is as clear and intuitive as possible.

Consistency

During OSCEs, candidates interact with standardized patients (SPs), who are trained for each part of the clinical encounter to portray the role in a consistent and measurable way. No matter which SP interacts with the candidate, the candidate will receive the same information and responses, ensuring a fair and valid assessment.

Our Resources

To administer our exams, we rely on core in-house personnel and a network of supportive staff, all with a firm commitment to providing fair and accessible assessments for candidates. We draw from a vast database of experts to meet the unique staffing needs of each assessment.

1,000 support staff

1,000 standardized patients

600 examiners

5 full-time exam coordinators, plus a unit manager

5 full-time SP trainers, plus a unit manager

Assessments for Physicians

The National Assessment Collaboration (NAC) Examination for International Medical Graduates



Developed by the National Assessment Collaboration (NAC), this examination is a national, standardized objective structured clinical examination (OSCE) that assesses the readiness of an international medical graduate (IMG) for entrance into a Canadian residency program.

Prior to 2015, the NAC Examination was optional for IMGs. However, Ontario medical schools recently enacted a recommendation that all IMGs be required to challenge the Medical Council of Canada's NAC Examination. In order to qualify for 2015 residency positions, candidates were required to submit their NAC Examination scores to CaRMS by November 2014.

As a result of the new requirements, the number of candidates registered to take the exam in Canada almost doubled from 2013 to 2014. In Ontario alone, well over 900 candidates were registered to complete the exam in September, in preparation for their first-year residency positions.

While the Medical Council of Canada serves as the central coordinating and administrative body for the NAC, the exam is administered regionally by provincial test centres. We are the only NAC Examination site in Ontario and the largest site in Canada.

To accommodate the increased number of test-takers this year, two additional dates



"Our principles centre on setting defensible competency standards in our evaluations that ensure fairness, objectivity, transparency and impartiality for all candidates while ensuring public safety. Working in partnership with professional colleges and regulatory bodies, we create, develop and implement our assessments based on global best-practice design procedures."

Debra SibbaldDirector, Assessment Programs

were added, resulting in four assessments administered within a nine-day period.

"We were happy to be able to accommodate a larger number of candidates," says Suzanne Bambrick, director of Human Resources and Operations and acting director of Finance and Administration, "and offer more frequent exam options with Toronto as the assessment location."

Even with our unique ability to accommodate a large number of participants, additional capacity was needed. For the first time, we administered assessments off-site, with two additional tracks at the Toronto Michener Institute. We also recruited and trained

additional standardized patients and examiners. Staff worked 12-hour days on successive weekends to administer the assessments, which they did with remarkably few challenges.

"CEHPEA rose to the challenge to increase its capacity to deliver the NAC exam this year," says Alexa Fotheringham, NAC Examination manager at the Medical Council of Canada. "They were already the largest test site in Canada, but almost doubled their capacity to meet the recent demand. CEHPEA staff members are clearly committed to ensuring that candidates are assessed properly and that the exam process is standardized, transparent and fair."

Canadian NAC Examination Volumes 2012-2014

	ВС	AB	МВ	ON	QC	NS	TOTALS
2012	69	173	75	492	122	_	931
2013	134	149	108	678	139	15	1,223
2014	215	285	155	1,161	341	60	2,217

Assessments for Nurses

Ontario's Competency Assessment Program for Internationally Educated Nurses



The Internationally Educated Nurses
Competency Assessment Program (IENCAP),
continues to grow to meet the needs of IENs
on their pathway to practice in Ontario. Our
commitment to the program has been
solidified in an agreement to administer the
assessment for the next three years.

This year, we increased our capacity to administer the assessment, as the number of candidates referred for evaluation continues to climb. In 2013, each assessment day consisted of two administrations, allowing a total of 144 candidates to challenge the exam on each day. In 2014, we added an extra administration, resulting in 216 candidates taking the IENCAP on each assessment day.

This required calling on a greater number of standardized patients and staff to accommodate the 13-hour exam days.

During several assessments, we welcomed observers from the Office of the Fairness Commissioner, the CNO and the CARE Centre for Internationally Educated Nurses. From within dedicated viewing stations, they were able to observe how candidates, standardized patients and examiners performed in a clinical encounter. Viewing an OSCE helps observers gain an understanding of the assessment process, the candidate's experience and the logistics involved in our large-scale exams.



"It remains a highlight of my professional career to be a part of this initiative. The effort that has been put into the program to ensure quality and provide adequate assessment remains inspiring to me. The efforts of the staff and examiners to maintain standardization, underline their commitment to this program and to the safety of the public in Ontario."

Tammy McParlan
Chief Nurse Examiner
Assistant Professor of Nursing, Nipissing University, North Bay

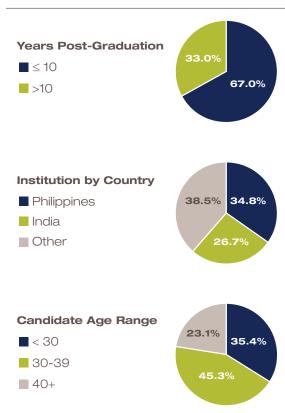
We were also joined by partners in the optometry field, who gained insight into the assessment process, which helped provide a foundation for their contributions to the development of the College of Optometrists of Ontario Evaluating Exam (COO EE).

Assessing Diverse Candidates: A Regulatory Challenge

Candidates with diverse overseas qualifications need to be screened for eligibility to write the Canadian Registered Nursing Examination (CRNE), now the National Council Licensure Examination for Registered Nurses (NCLEX-RN). Launched in 2013, IENCAP assists in assessing the equivalency of the diverse international qualifications to Canadian nursing programs. It reliably assesses IENs' readiness to write the registration exam and provides feedback on areas for further improvement.

The assessment was developed with content experts and conforms to an entry-to-practice competency blueprint. Chief examiners prerated the items, with criterion-anchored tools that validated content and competency scoring schemes. It consists of written multiple choice clinical examination and a series of OSCE stations that assess nursing

IENs Assessed To-Date





"It has been really exciting to have been part of this process from the beginning. The IENCAP ultimately helps the candidates achieve their goal of becoming nurses in Canada."

Heather Scott
Chief Nurse Examiner
Care Coordinator, Community Care Access Centre, Hamilton General Hospital, Emergency Department

knowledge, skills, judgment, client interactions, language proficiency and comprehension.

IENCAP has proven to be a valuable complement to traditional credential screening for the licensing exam. The test design incorporates appropriate parameters and measures to validate competency-based performance assessment for eligibility compared to graduates from Canadian programs. The result is improved recognition of diverse overseas qualifications through a defensible and appropriate assessment process that is fair, transparent, objective and impartial.

Nurse Practitioner Practice Assessment

In 2011, we worked with the College of Nurses of Ontario (CNO) to create a Quality Assurance Practice Objective Structured Clinical Exam for nurse practitioners in the province. With the launch of new competencies for nurse practitioners, we are working with the College to create a new quality assurance assessment for 2015.

Facts & Figures

An IENCAP assessment in 2014 consisted of:

3 administrations per day

6 tracks

12 exam stations

10 viewing stations for inter-rater reliability

82 examiners

100 support staff

110 standardized patients

216 candidates assessed on each day

1,300 candidates are expected to be assessed in 2014

Assessments for Optometrists

Launching a New Examination for Internationally Educated Optometrists



In January 2014, we began working with the College of Optometrists of Ontario (COO) to develop an exam for internationally educated optometrists (IEOs). The COO Evaluating Exam tests the knowledge, skills, attitudes and values of the candidates as compared to a recent graduate of a Canadian optometric program, and assesses their eligibility to write the licensing exam.

Exam Development

A panel of Ontario optometrists and our inhouse exam experts participated in a blueprinting exercise to articulate professional competencies and general attributes for the evaluation. Key competencies were identified based on the College of Optometrists of

Ontario Competency-Based Performance Standards for Canadian Standard Assessment in Optometry (2005).

The resulting evaluation exam consists of two components - a written test and a performance evaluation. In order to evaluate the candidate's ability to conform to the scope of practice for optometrists, the assessment process includes physical eye examinations. Unlike our OSCEs for physicians, nurses and nurse practitioners, the optometry stations involved more physical testing and the assessment team met these challenges in understanding and acquiring the appropriate equipment.

Field Testing

A field test held in August 2014 ensured that the clinical stations and written exam were feasible and acceptable logistically, with respect to content relevance, presentation, timing and level of difficulty. Scoring stations used a criterion-based validation tool, while observers and examiners provided qualitative feedback to help fine-tune the clinical stations and offer commentary on the written multiple choice exam.

Exam Pilot

In November 2014, optometry registrars from across Canada observed the pilot test to assess the role the exam could play for their jurisdictions. Our evaluating exam can be made available to candidates seeking licensure throughout English-speaking Canada.

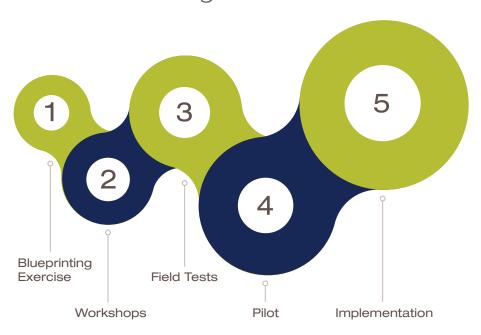


Debra Sibbald leads a panel of Ontario optometrists through an assessment blueprinting exercise.

Plan for Implementation

We continue to refine this evaluation assessment in preparation for the launch of the Optometry Evaluating Examination, which is slated for June 2015.

Development of an Evaluating Exam





To provide optometry partners with insight into our exam processes, they observed dry run assessment activities and training of our standardized patients for their roles.



Suzanne Bambrick gives optometry experts an overview of logistics for the assessment blueprinting process.

COMMUNICATION

COMPETENCY PROGRAM

The ability to communicate effectively is a critical asset for newcomers pursuing a professional registration pathway. Health care professionals are expected to practise safely, with integrity and professionalism, and be able to communicate across language, cultural, generational and situational barriers. This is described as "communication competency." In order to demonstrate communication competency, health care professionals must be able to use language effectively and appropriately to deliver quality patient care in Ontario's inter-professional, multicultural and client-centred health care environment.*



"Ultimately, we want to create a resource hub to support regulators across Canada in addressing the assessment of language and communication competencies in a manner that is relevant, fair and accessible. This is an area that regulators constantly grapple with – especially in reference to guidelines from the Office of the Fairness Commissioner for relevant and fair assessments. Given the organization's wellestablished expertise in competency assessments and training, we believe we can contribute in the specific areas of language and communication skills."



Andrea Strachan Director, Communication Competency Program

Recognizing the importance and impact of language proficiency measurement as part of the professional registration pathway for internationally educated health professionals (IEHPs) in Ontario, we have established a new unit dedicated to assessing communication competency assessment. Funding for the program was provided by the Ontario Ministry of Citizenship Immigration and International Trade (MCIIT).

The Communication Competency Program started in April 2014 with the appointment of Andrea Strachan, a national expert in language proficiency standards for regulators.

Our program draws extensively on the findings of the 2013 Ontario Centre of Excellence for Communication Competency Assessment (OCECCA) Project report. The report recommended the creation of an OCCECA Centre to serve as a hub for occupationspecific languages assessments and other related resources and services for IEHPs.

Devoted to fostering excellence in occupation-specific language assessments, our Communication Competency Program strives to:

- Develop alternative assessments of language and communication competency for both individuals and groups across career stages
- Improve existing assessments and design new tests to meet the evolving requirements of professional practice
- Administer secure and reliable healthspecific language assessments that may be used to demonstrate communication fluency at entry to practice
- Assist regulators in establishing fair and defensible language proficiency standards and accessible professional examinations



Early Results

Our organization has a reputation for responding quickly to changing needs in Ontario's health care system and creating innovative new programs from the ground up. The launch of our new Communication Competency Program was no exception. Within six months of hiring the director, a team of three has been recruited and a lot of work is underway. Here are some highlights of progress as of November 2014:

- Awarded a grant by MCIIT to implement the OCECCA Implementation and Evaluation Project through our Communication Competency Program
- Created an interdisciplinary Communication Competency Program Project Advisory Committee (regulators, academics and communication specialist)

- Started liaising with health care regulatory bodies and employers to discuss needs and opportunities
- Began a CELBAN review process that will provide a strong foundation to inform the renewal and development of CELBAN test forms. The review will include a language proficiency review, nursing scope of practice review and technical review
- Began exploration of license agreements with existing occupation-specific language assessments
- Submitted an RFP and was successful bidder to become the national administrator and manager of the Canadian English Language Benchmark Assessment for Nurses (CELBAN)
- Initiated a research project to evaluate the effectiveness of CELBAN

Introducing the CELBAN Centre



CELBAN is a language proficiency test that is accepted by nursing regulatory bodies and the preferred option for many internationally

educated nurses (IENs). The test, which is occupation-specific, evaluates language proficiency in speaking, listening, writing and reading English, using tasks that are set in a nursing context. Occupation-specific tests, such as CELBAN, help candidates prepare for the language demands of their professional practice and the workforce.

This test will be administered in Canada through our Communication Competency Program's CELBAN Centre. The Centre will focus entirely on administration of the test and will allow for the broader work with regulators in the area of communication competency assessments to continue as the central focus of the program.

"Our initial priority is to scout out suitable locations and assessors across Canada to run the CELBAN assessment, and we hope to leverage those resources to build the infrastructure to support other regulatory bodies in running assessments across the country," says Andrea Strachan.

CELBAN Summary Plan

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- Reinstate testing
- Address wait list through "pop up" test sessions
- Review and update policies and procedures
- Establish online registration
- Develop capacity
- Launch CELBAN Centre website

enewa

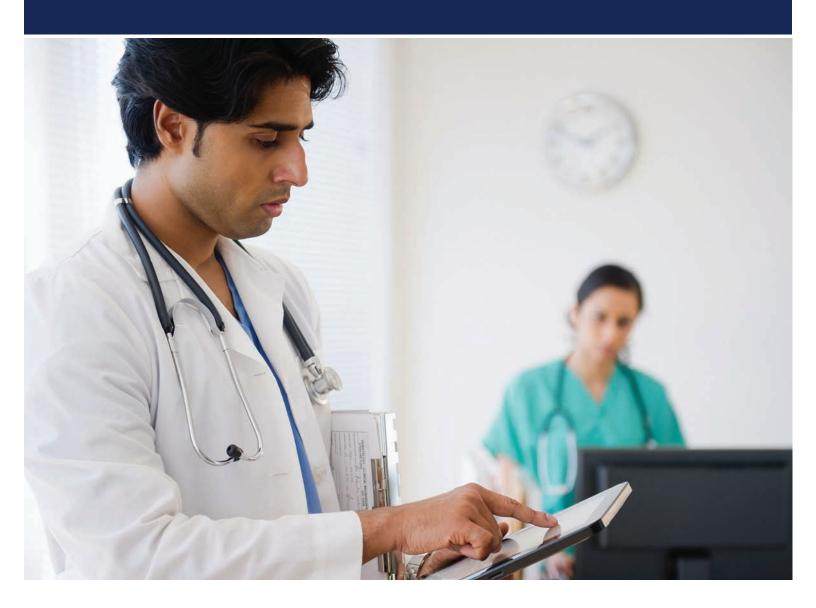
- Revise blueprint and create
- and certification
- Establish a quality

- Increase number of test sessions administered nationally
- Access in areas previously not served
- Establish feasibility of online delivery
- Institute ongoing content renewal

EDUCATION PROGRAMS

FOR PHYSICIANS EDUCATED ABROAD

We offer transition programs for international medical graduates (IMGs) who have been accepted into Ontario residency programs through the Canadian Resident Matching Service (CaRMS). The programs provide IMGs (including Canadians educated abroad) with curriculum, orientation and services to familiarize them with Canadian health systems and practices before they begin their residency training.



Key Features of Our Education Programs

- Our education programs are comprehensive, flexible and innovative. They were developed in consultation with program directors at Ontario's faculties of medicine. Canadian physicians with extensive educational experience are instructors, advisors, consultants and facilitators.
- The Pre-Residency Program (PRP) and the Orientation to Training and Practice in Canada (OTPC) program start and end with "skills checks" through objective structured clinical examinations (OSCEs) with standardized patients and physician examiners. The checks provide candidates with valuable feedback on their knowledge and skills in a safe learning environment.
- Through the Academic Advising Program, physicians are able to provide guidance to students on setting individual goals and objectives.
- Our courses offer a blend of classroom, simulation and online learning experiences. The integrated classroom sessions consist of interactive lectures and small group sessions with standardized patients and physician facilitators. Self-directed and facilitated online modules are available for students prior to their arrival for classroom sessions and are sequenced in a way that complement the classroom sessions.
- In 2015, we will be implementing a new modular model and renaming our programs. Core courses, referred to as PRP, will be relevant to all specialties. PRP-FM will include the core courses in PRP plus modules specific to family medicine.

EDUCATION PROGRAMS

At a Glance

Orientation to Training and Practice (OTPC)

The two-week OTPC was developed to help IMGs prepare for a successful transition into specialty residency training programs in Ontario. This mandatory program covers key competency areas as well as topics such as communication, law and ethics, privacy, confidentiality and dealing with challenging situations. The program includes Advanced Cardiovascular Life Support (ACLS) certification training.

Pre-Residency Program (PRP)

PRP is a mandatory program for all IMGs who are accepted into an Ontario family medicine residency program.

Phase 1 of PRP, which takes place at our Toronto office, is a compressed, four-and-a half week program that includes a blend of classroom, simulation and online learning. The course includes ACLS certification training and customized courses that address key issues in family practice. Phase I must be completed before beginning Phase 2 of the program, which is conducted at the university where the candidate is matched.

NEW Canadian Medicine Primer (CMP)

In 2014, we developed and piloted a new, custom immersion program for sponsored visa trainees and clinical fellows. The Canadian Medicine Primer is a two-and-a-half week program that was created to enhance the skills and knowledge of these trainees and facilitate the successful transition to residency training and postgraduate education in Ontario.

In addition to customized sessions to meet their unique needs, the trainees and fellows are integrated into PRP sessions. The primer was launched in 2014 with an expansion of the program tracking for 2015.



"We are very pleased with the program renewal milestones we have achieved so far. The evaluations have been very positive and our advisors report that learners are much more enthusiastic and engaged than in the past. I believe that I can speak for our academic consultants and partners when I say that it has been a very exciting journey."

Marie Rocchi Director, Education Programs

Evolving to Meet Changing Needs

In 2011, we embarked on a three-year period of program renewal spurred by shifting demographics, emerging trends in medical education and feedback from students. lecturers and program directors at Ontario's medical schools. Here are some of the highlights.

Creating Online Modules and Blended Programs

The revamp started with the launch of a hybrid program (classroom, experiential and online learning modules). The blended program greatly increased learner autonomy and the flexibility of scheduling and resulted in a shorter, integrated program. At the same time, the curriculum was enhanced to focus more on the CanMEDs framework and clinical and system issues.

Increasing the Role of Physicians

The next series of changes greatly increased the role of physicians in programs. Academic consultants were appointed to provide input and guidance in developing our transition programs. The Academic Advising Program was created to provide trainees with a faculty point of contact and to allow them to receive individualized feedback on their performance in various assessments.

Developing Integrated Skills Checks

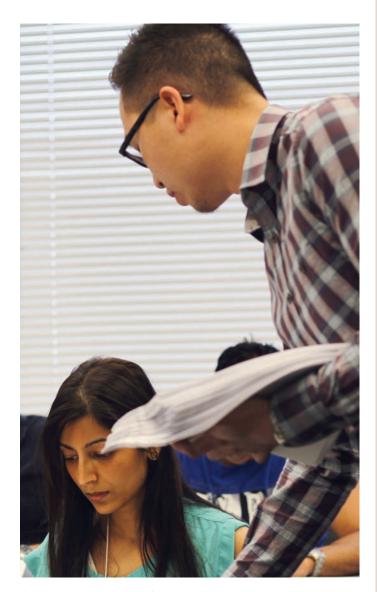
Skills checks were introduced to provide an assessment of candidates' knowledge and skills at the beginning and end of the programs. The checks are offered in an OSCE format using standardized patients and physician examiners.

As the transition programs expanded in depth and breadth, so did the skill checks. In 2013, skills check assessments moved beyond medical, clinical and communication issues to include ancillary services and broader, legal, ethical and health system issues.

With assistance from our Exam Unit, the Education Unit developed a rigorous assessment process and customized template to ensure that the data generated by the skills check process are more valid and reliable. The improved skills checks provide realistic encounters and a more authentic benchmark of learners' skills at the beginning of the program so that any gaps can be addressed through the curriculum.

Introducing Physician Facilitators

In 2014, our education programs achieved another milestone by including physician facilitators in the skills checks and small group sessions. In the small group sessions, three to six trainees have simulated encounters with standardized patients several times per week as part of the experiential component of the course. In the past, the sessions were facilitated by standardized patients, but now physicians facilitate and lead the sessions, providing individualized feedback in a supportive environment. In another new development this year, education programs used patients from our own Standardized Patient Program, rather than outsourcing that service.



Simon Nguyen, one of our exam coordinators, helps to prepare candidates for the education program skills check.

WHAT OUR **ACADEMIC CONSULTANTS**

Are Saying:

"CEHPEA's orientation programs really help IMGs make the transition to postgraduate education and adapt to the many different environments they will be training in."

Dr. Fok-Han Leung

Staff Physician, St. Michael's Hospital Assistant Professor, Department of Family and Community Medicine

Associate Director, Assessment and Evaluation Postgraduate Family Medicine Program University of Toronto

"CEHPEA does not focus solely on medical, clinical and communications issues. We also want the trainees to think about related services and broader legal, ethical and health system issues. We really want to help them prepare for the real issues they will face when they train and later practice independently."

Dr. Shobhan Vachhrajani

Senior Resident Division of Neurosurgery University of Toronto

"As program director and clinical preceptor for Family Medicine at Western University, I have experienced the benefits of CEHPEA's transition programs, both on an individual and organizational level."

Dr. Eric Wong

Associate Professor, Department of Family Medicine Academic Director, Distributed Education Network Schulich School of Medicine and Dentistry Western University

BUILDING CAPACITY

FOR RAPID GROWTH

In 2013/2014, we focused on strengthening our organizational structures and building capacity to support the new business areas we created and the expansion of our existing programs and assessments. We continued to invest in human resources, expanded the Standardized Patient Program, updated our technology and increased our psychometric services.



In the past year, our competency assessments experienced unprecedented growth:

- The Internationally Educated Nurses Competency Assessment Program (IENCAP) increased from 610 candidates in 2013 to 950 in 2014.
- The National Assessment Collaboration (NAC) examination volumes increased from 678 in 2013 to 1.161 in 2014.
- A new examination for internationally educated optometrists was developed and piloted with all the specialized training and equipment that entailed.

We introduced customized programming for sponsored visa trainees and clinical fellows and continued to improve our transition programs for international medical graduates (IMGs).

A major focus in the past year has been on strengthening the organizational structure, breaking down silos and continuing to invest in human resources to provide opportunities for staff development, growth and advancement. We have put in place many other activities and programs to build the organization's infrastructure and capacity, including:

- Expanding the Standardized Patient Program
- Updating our technology
- Increasing psychometric services

Expanding the Standardized Patient Program

Over the last three years, our Standardized Patient (SP) Program has tripled in size to become the second largest program in Canada. The program includes a diverse pool of approximately 1,200 standardized patients - men and women aged 14 to 75, of all physical types, ethnic groups and backgrounds - as well as five full-time trainers and a manager.

"CEHPEA staff members have a wealth of knowledge in the area of communication skills and they are experts in the use of patient simulation - an area of expertise that is not available in many places in Ontario," says Dr. Marcus Law, chief examiner at CEHPEA.

The SP Program is a key resource for our organization. As we develop new assessments and education courses, and see

WHAT ARE

Standardized Patients?

Standardized patients are people who have been trained to portray patients in various medical situations in a consistent, standardized manner. While some are actors, many are not. They learn cases based on real patients, simulating their physical signs in simulated interviews and examinations by health care professionals. Patient simulations are a core component of Objective Structured Clinical Examinations (OSCEs). They also play a vital role in training programs by providing candidates with feedback and the opportunity to practice clinical skills in a safe training environment.

continued growth in our existing offerings, our SPs and trainers have successfully adapted to meet the needs of each program.

The new optometry assessment presented some unique challenges for our SP program. Assessment experts, trainers and SPs needed to understand and prepare for the physical interactions and extensive array of equipment that the exam requires. SPs also needed to be screened in advance by practicing optometrists to ensure their suitability to participate and to rule out actual diseases of the eye.

"The optometry exam is very different from other assessments that we have previously run," says Fergus O'Connor, manager of the SP Program. "Optometry was a whole new field. We had to learn about new medical terminology, order extensive equipment and identify and solve unique issues with standardized patients."

This year, instead of relying on outsourced SPs, we drew on expertise of our own SPs to support the Education Program. This presented another learning curve for the team. Rather than being "super standardized" as they are in assessments, SPs in our education programs observe and provide feedback for candidates, providing valuable insight into each interaction and how it made them feel. SPs and trainers relish the opportunity to work with physicians in an educational rather than assessment setting. The learners also enjoy the experience, and this aspect of the program received very positive feedback from candidates.

"Although it has been a challenging year with lots of new programs, it has been worth it," says Fergus O'Connor. "It certainly has been

very exciting to work here and rewarding to see the direction we are going and how our program has grown substantially."

Increasing Psychometric Services

Our organization has always taken great care to evaluate and validate the results of the tests we design and administer. Our assessment and psychometric teams work together to create new tests while constantly fine-tuning existing examination content, test administration and test results based on established evaluation best practices.

We developed and administered the first competency-based tests for IMGs seeking licences to practice in Ontario. Given our experience and expertise, we have had the opportunity to play a leadership role in the design of the blueprint and tests for the National Assessment Collaboration (NAC), the national competency-based screening examination developed and administered under the auspices of the Medical Council of Canada (MCC). Arthur Rothman, our psychometrician consultant, was appointed as the first chairman of the NAC Test Committee to lead this initiative and continued to be actively involved as our representative on the committee.

With the launch of the NAC examination and a new assessment for internationally educated nurses (IENs), our psychometric team expanded with the hiring of two additional staff psychometricians. The expanded team will assure the quality of the results of higher test volumes for the NAC and the College of Nurses of Ontario (CNO), and the development of assessments for new clients, including the College of Optometrists of Ontario (COO).

The psychometric team also plays a role in our orientation courses for IMGs entering residencies in Ontario. The team scores and analyzes the results of skills checks that assess candidates' competency at the beginning and end of the orientation, providing valuable feedback to the students and residency program directors.

Updating Our Technology

In 2013/2014, we embarked on a mission to consolidate, simplify and upgrade internet services, servers and Wi-Fi networks to support the organization's expansion and achieve efficiencies. Our Wi-Fi networks can now accommodate 250 to 300 concurrent connections, ensuring sufficient bandwidth to support our learners and to enable our movement towards more automated data capture during examinations.

As well, the switch from a cable internet connection to fibre-based services has been instrumental in bringing increased speed and functionality to the organization.

We also completed a major upgrade of audiovisual systems. Given the high-stakes nature of the many assessments occurring at our facilities, our recording system is a crucial component in monitoring and defending the integrity of the assessment process for quality assurance purposes. We updated from analog to digital, enabling rapid playback, download and analysis of video footage. Better placement of microphones and installation of new cameras in the clinical examination rooms has improved audio-visual quality. In addition, the control centre has been upgraded with 12 new monitors, with the capacity to view the 78 exam rooms through 156 cameras.

Unique Facilities

SPECIALLY DESIGNED FOR HIGH-STAKES ASSESSMENTS

Located in Toronto, we have the largest assessment centre of its kind in Canada. The facilities have a fully secure environment, specifically designed for test security. All entries are passkey protected, the testing floor has the appropriate sequestering rooms for candidates awaiting interviews. At full capacity, we can assess up to 216 candidates in one day. The facility is equipped with 78 individual exam rooms and two large group test rooms. Each group test room can hold up to 72 candidates comfortably for multiple choice question exams. Over 2,000 internationally educated health professionals (IEHPs) are assessed by our exam experts every year.





INTRODUCING

OUR TEAM

Our team consists of many different groups that work together to facilitate entry to practice for internationally trained health professionals. Our Board of Directors provides governance and strategic direction, including the creation of our Strategic Plan. The Executive Team is responsible for overseeing our day-to-day operations and implementing the Strategic Plan. Our in-house experts create and validate our exams and training programs, recruit and train external experts to meet the unique needs of each exam, administer large-scale examination and education programs, manage the Standardized Patient Program and maintain the smooth operation of our facilities. Meet the team!*



Board of Directors

From left to right: Steven Watts, partner, KPMG LLP; Dr. Rocco Gerace, registrar, College of Physicians and Surgeons of Ontario; Brenda Zimmerman, director, Health Industry Management Program, Schulich School of Business, York University; Dr. Kenneth Harris, director, Office of Education, Royal College of Physicians and Surgeons of Canada; John McKinley, principal, JMcKinley Consulting and CloudIPHI; Anne Coghlan, executive director and CEO, College of Nurses of Ontario; and Sten Ardal, CEO, CEHPEA.

Absent: George M. Thomson, senior director, International Programs at the National Judicial Institute and Mark Walton, assistant dean, Post-Graduate Medical Education, McMaster University.

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From left to right: Dr. Murray Urowitz, Andrea Strachan, Debra Sibbald, Suzanne Bambrick and Sten Ardal.

Administration and Program Support

From left to right: Adrian Frisina, Alyssia Tassone and Afsheen Hasan.



Exam Unit



Operations Team

From left to right: Sarah Wood, Will Truong, Sara Cecchetto, Simon Nguyen, Alex Tran, Raffa De Fazio and Meng To.

From left to right: Bill Quinn, Daniel Grossutti and Arjun Puri.



Psychometric Team

From left to right: Darko Giacomini, Arthur Rothman and Sandra Monteiro.



Standardized Patient Unit

From left to right: Fergus O'Connor, Laura Segal, Karen Huszar, Tami Karakasis and Amy Myers.

SHARING OUR EXPERTISE



In 2013/2014, we travelled across Canada and abroad to connect with others in the field of competency assessment and education. Our in-house team and physician consultants shared their learning and expertise in the presentations that follow. Contributors included Dr. Fok-Han Leung, Dr. Eric Wong, Dr. Shobhan Vachhrajani, Marie Rocchi, Debra Sibbald, Dr. Murray Urowitz, Arthur Rothman, Fergus O'Connor, Sandra Monteiro and Sten Ardal.

Meeting the Challenge of Changing Learner **Demographics in an Orientation Program for Internationally Educated Medical Graduates:**

A Blended, Individualized, Physician-Led Learning Approach. Canadian Conference on Medical Education, Quebec City, April 2013

Academic Advising for International Medical Graduates: A Systematic, Individualized Model. Canadian Conference of Medical Education, Quebec,

Validation of a Clinical Examination for

Internationally Educated Nurses (IENs).

Association for Medical Education in Europe, Prague, August 2013

14th IMG Symposium (Display Booth). Canadian Resident Matching Service, Toronto, January, 2014

Competence Assessments of Internationally Educated Nurses (IENs) Successfully Evaluate Eligibility for Canadian Licensure Examination. Ottawa Conference, Ottawa, April 2014

The Impact of a Transition Program for International **Medical Graduates on Communication and Clinical** Skills. Ottawa Conference, Ottawa, April 2014

Effectiveness of an Individualized Academic Advising Program for International Medical Graduates.

Canadian Conference on Medical Education, Ottawa, **April** 2014

IEN Competency Assessment Program.

8th Annual Partners in Education and Integration of IENs Conference, Toronto, May 2014

Competence Assessments Successfully Evaluate Eligibility of Diverse Internationally Educated Nurses (IENs) for Canadian Licensure Examination.

Association for Medical Education in Europe, Milan, September 2014

Strengths and Challenges of OSCEs (Workshop).

Canadian Network of National Associations of Regulators Conference, Montreal, October 2014

Perspectives in Competency Assessment.

The first annual Touchstone Institute symposium brings together experts from a variety of backgrounds to explore theories, challenges and future trends in competency assessment. MaRS Collaboration Centre, Toronto, February 2015

April 2013

Our New Name



Since 2007, CEHPEA has been providing excellence in competency evaluation. In January 2015, we will become Touchstone Institute, a name and identity that reflects our view to a progressive future. As Touchstone Institute, we look forward to further expanding and enhancing our services, working with regulators, our partners and specialists to facilitate entry to practice for internationally trained health professionals.